

Fill in this information to identify your case and this filing:

Debtor 1	<b>Joe</b>	<b>Nathan</b>	<b>Woodson</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Aisha</b>	<b>Nicole</b>	<b>Dennis</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Northern</b> District of <b>Texas</b>			
Case number	<b>24-43704</b>		

☐ Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☒ No. Go to Part 2.  
☐ Yes. Where is the property?

1.1

Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here



\$0.00

#### Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No  
☒ Yes

Debtor **Joe Nathan Woodson; Aisha Nicole Dennis**

Case number (if known) **24-43704**

3.1 Make: **Chevrolet** Who has an interest in the property? Check one.  
 Model: **Tahoe** ☐ Debtor 1 only  
 Year: **2017** ☐ Debtor 2 only  
 Approximate mileage: **118000** ☒ Debtor 1 and Debtor 2 only  
 Other information: ☐ At least one of the debtors and another  
☒ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **\$14,375.00** Current value of the portion you own? **\$14,375.00**

Source of Value: NADA  
VIN: 1GNSCBKC4HR250455

If you own or have more than one, describe here:

3.2 Make: **Hyundai** Who has an interest in the property? Check one.  
 Model: **Santa Fe** ☐ Debtor 1 only  
 Year: **2014** ☐ Debtor 2 only  
 Approximate mileage: **130000** ☒ Debtor 1 and Debtor 2 only  
 Other information: ☐ At least one of the debtors and another  
☒ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **\$9,600.00** Current value of the portion you own? **\$9,600.00**

Source of Value: NADA  
VIN: 5XYZU3LB1EG165213

3.3 Make: **Honda** Who has an interest in the property? Check one.  
 Model: **Accord** ☐ Debtor 1 only  
 Year: **2022** ☐ Debtor 2 only  
 Approximate mileage: **88000** ☒ Debtor 1 and Debtor 2 only  
 Other information: ☐ At least one of the debtors and another  
☒ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **\$18,566.00** Current value of the portion you own? **\$18,566.00**

Source of Value: NADA  
VIN: (1HGCV1F39NA092279

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No  
☐ Yes

4.1 Make: \_\_\_\_\_ Who has an interest in the property? Check one.  
 Model: \_\_\_\_\_ ☐ Debtor 1 only  
 Year: \_\_\_\_\_ ☐ Debtor 2 only  
 Other information: ☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \_\_\_\_\_ Current value of the portion you own? \_\_\_\_\_

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here .....



**\$42,541.00**

Debtor **Joe Nathan Woodson; Aisha Nicole Dennis**

Case number (if known) **24-43704**

**Part 3:** Describe Your Personal and Household Items

**Do you own or have any legal or equitable interest in any of the following items?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

*Examples:* Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe. ....

**See Attached.**

**\$1,120.00**

**7. Electronics**

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe. ....

**See Attached.**

**\$600.00**

**8. Collectibles of value**

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe. ....

**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No

☐ Yes. Describe. ....

**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe. ....

**11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe. ....

**Clothing (Adults 3. Children- 3)**

**\$600.00**

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe. ....

**Wedding Rings**

**\$1,000.00**

Debtor **Joe Nathan Woodson; Aisha Nicole Dennis**

Case number (if known) **24-43704**

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

☐ No

☒ Yes. Describe. ....

**Guinee Pig (2)**

**\$100.00**

**14. Any other personal and household items you did not already list, including any health aids you did not list**

☒ No

☐ Yes. Give specific information. ....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**



**\$3,420.00**

**Part 4: Describe Your Financial Assets**

**Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes ..... Cash: .....

**\$0.00**

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes .....

Institution name:

17.1. Checking account:	<b>Chime</b> <b>Account Number: 6458</b>	<b>\$1.09</b>
17.2. Checking account:	<b>Chime</b> <b>Account Number: 0603</b>	<b>\$81.37</b>
17.3. Checking account:	<b>First Convenience Bank</b> <b>Account Number: 7398</b>	<b>\$292.91</b>
17.4. Savings account:	<b>Chime</b> <b>Account Number: 3922</b>	<b>\$5.50</b>
17.5. Other financial account:	<b>Cash App</b> <b>Account Number: 3360</b>	<b>\$0.00</b>
17.6. Other financial account:	<b>Cash App</b> <b>Account Number: 5391</b>	<b>\$16.00</b>

Debtor **Joe Nathan Woodson; Aisha Nicole Dennis**

Case number (if known) **24-43704**

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes ..... Institution or issuer name:

_____	_____
_____	_____
_____	_____

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☒ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

_____	_____	_____
_____	_____	_____
_____	_____	_____

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.

*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them.....

Issuer name:

_____	_____
_____	_____
_____	_____

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No

☐ Yes. List each

account separately.

Type of account:

Institution name:

401(k) or similar plan:	_____	_____
Pension plan:	_____	_____
IRA:	_____	_____
Retirement account:	_____	_____
Keogh:	_____	_____
Additional account:	_____	_____
Additional account:	_____	_____

Debtor **Joe Nathan Woodson; Aisha Nicole Dennis**

Case number (if known) **24-43704**

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes .....

Institution name or individual:

Electric:

Gas:

Heating oil:

Security deposit on rental unit:

Prepaid rent:

Telephone:

Water:

Rented furniture:

Other:

**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes .....

Issuer name and description:

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes .....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No

☐ Yes. Give specific information about them. ...

Debtor **Joe Nathan Woodson; Aisha Nicole Dennis**

Case number (if known) **24-43704**

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them. ...

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them. ...

**Money or property owed to you?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

☐ No

☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

**2023 tax refund**

Federal:

**\$5,598.00**

State:

Local:

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information. ....

Alimony:

Maintenance:

Support:

Divorce settlement:

Property settlement:

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information. ....

Debtor **Joe Nathan Woodson; Aisha Nicole Dennis**Case number (if known) **24-43704****31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☒ No

☐ Yes. Name the insurance company of each policy and list its value. ... Company name: Beneficiary: Surrender or refund value:


**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information. ....

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**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☒ No☐ Yes. Describe each claim. ....

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**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim. ....

--

**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information. ....

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**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here .....****\$5,994.87****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**☒ No. Go to Part 6.☐ Yes. Go to line 38.

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.



Debtor **Joe Nathan Woodson; Aisha Nicole Dennis**

Case number (if known) **24-43704**

38. **Accounts receivable or commissions you already earned**

☒ No

☐ Yes. Describe. ....

39. **Office equipment, furnishings, and supplies**

*Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices*

☒ No

☐ Yes. Describe. ....

40. **Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

☒ No

☐ Yes. Describe. ....

41. **Inventory**

☒ No

☐ Yes. Describe. ....

42. **Interests in partnerships or joint ventures**

☒ No

☐ Yes. Describe .....

Name of entity:

% of ownership:

43. **Customer lists, mailing lists, or other compilations**

☒ No

☐ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?

☐ No

☐ Yes. Describe. ....

Debtor **Joe Nathan Woodson; Aisha Nicole Dennis**

Case number (if known) **24-43704**

44. **Any business-related property you did not already list**

- ☒ No  
☐ Yes. Give specific information .....


45. **Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here .....**



**\$0.00**

**Part 6:** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
**If you own or have an interest in farmland, list it in Part 1.**

46. **Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

47. **Farm animals**

*Examples:* Livestock, poultry, farm-raised fish

- ☒ No  
☐ Yes .....

--

48. **Crops—either growing or harvested**

- ☒ No  
☐ Yes. Give specific information. ....

--

49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☒ No  
☐ Yes .....

--

50. **Farm and fishing supplies, chemicals, and feed**

- ☒ No  
☐ Yes .....

--

Debtor **Joe Nathan Woodson; Aisha Nicole Dennis**

Case number (if known) **24-43704**

51. Any farm- and commercial fishing-related property you did not already list

☒ No

☐ Yes. Give specific information. ....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here .....



**\$0.00**

**Part 7:** Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

*Examples:* Season tickets, country club membership

☒ No

☐ Yes. Give specific information. ....

54. Add the dollar value of all of your entries from Part 7. Write that number here .....



**\$0.00**

**Part 8:** List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 .....



**\$0.00**

56. Part 2: Total vehicles, line 5

**\$42,541.00**

57. Part 3: Total personal and household items, line 15

**\$3,420.00**

58. Part 4: Total financial assets, line 36

**\$5,994.87**

59. Part 5: Total business-related property, line 45

**\$0.00**

60. Part 6: Total farm- and fishing-related property, line 52

**\$0.00**

61. Part 7: Total other property not listed, line 54

+

**\$0.00**

62. Total personal property. Add lines 56 through 61. ....

**\$51,955.87**

Copy personal property total ➔

**+ \$51,955.87**

63. Total of all property on Schedule A/B. Add line 55 + line 62. ....

**\$51,955.87**

Debtor **Joe Nathan Woodson; Aisha Nicole Dennis**Case number (if known) **24-43704**

## Continuation Page

6.	Household goods and furnishings	
	<u>Bed (4)</u>	<u>\$200.00</u>
	<u>Dishes / Flatware</u>	<u>\$50.00</u>
	<u>Dressers / Nightstands</u>	<u>\$400.00</u>
	<u>Freezer</u>	<u>\$100.00</u>
	<u>Kitchen Table / Chairs</u>	<u>\$200.00</u>
	<u>Microwave</u>	<u>\$20.00</u>
	<u>Pots / Pans / Cookware</u>	<u>\$50.00</u>
	<u>Sofa</u>	<u>\$100.00</u>
7.	Electronics	
	<u>Laptop</u>	<u>\$200.00</u>
	<u>Television (2)</u>	<u>\$200.00</u>
	<u>Video Game System</u>	<u>\$200.00</u>

Fill in this information to identify your case:

Debtor 1	<b>Joe</b>	<b>Nathan</b>	<b>Woodson</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Aisha</b>	<b>Nicole</b>	<b>Dennis</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Northern</b> District of <b>Texas</b>			
Case number (if known)	<b>24-43704</b>		

☐ Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

## Part 1: Identify the Property You Claim as Exempt

## 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own  Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim  <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description:	<b>2017 Chevrolet Tahoe</b> VIN: <b>1GN5CBKC4HR250455</b>	<b>\$14,375.00</b>	<input checked="" type="checkbox"/> <b>\$0.00</b>	<b>11 U.S.C. § 522(d)(5)</b>
Line from <i>Schedule A/B</i> :	<b>3.1</b>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

## 3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

Debtor 1 Joe Nathan Woodson Case number (if known) 24-43704

Debtor 2 Aisha Nicole Dennis

First Name Middle Name Last Name

## Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>2014 Hyundai Santa Fe</u> VIN: <u>5XYZU3LB1EG165213</u>	<u>\$9,600.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u>	<u>11 U.S.C. § 522(d)(2)</u>
Line from Schedule A/B: <u>3.2</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>2022 Honda Accord</u> VIN: <u>(1HGCV1F39NA092279</u>	<u>\$18,566.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u>	<u>11 U.S.C. § 522(d)(2)</u>
Line from Schedule A/B: <u>3.3</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>Sofa</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>6</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>Freezer</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>6</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>Microwave</u>	<u>\$20.00</u>	<input checked="" type="checkbox"/> <u>\$20.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>6</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>Dishes / Flatware</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>6</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>Pots / Pans / Cookware</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>6</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Debtor 1 **Joe Nathan Woodson** Case number (if known) **24-43704**

Debtor 2 **Aisha Nicole Dennis**

First Name Middle Name Last Name

## Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: <b>Bed (4)</b> Line from Schedule A/B: <b>6</b>	<b>\$200.00</b>	<input checked="" type="checkbox"/> <b>\$200.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Brief description: <b>Dressers / Nightstands</b> Line from Schedule A/B: <b>6</b>	<b>\$400.00</b>	<input checked="" type="checkbox"/> <b>\$400.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Brief description: <b>Kitchen Table / Chairs</b> Line from Schedule A/B: <b>6</b>	<b>\$200.00</b>	<input checked="" type="checkbox"/> <b>\$200.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Brief description: <b>Television (2)</b> Line from Schedule A/B: <b>7</b>	<b>\$200.00</b>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Brief description: <b>Video Game System</b> Line from Schedule A/B: <b>7</b>	<b>\$200.00</b>	<input checked="" type="checkbox"/> <b>\$200.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Brief description: <b>Laptop</b> Line from Schedule A/B: <b>7</b>	<b>\$200.00</b>	<input checked="" type="checkbox"/> <b>\$200.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Brief description: <b>Clothing (Adults 3. Children- 3)</b> Line from Schedule A/B: <b>11</b>	<b>\$600.00</b>	<input checked="" type="checkbox"/> <b>\$600.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Brief description: <b>Wedding Rings</b> Line from Schedule A/B: <b>12</b>	<b>\$1,000.00</b>	<input checked="" type="checkbox"/> <b>\$1,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit <input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(4)</b> <b>11 U.S.C. § 522(d)(5)</b>
Brief description: <b>Guinee Pig (2)</b> Line from Schedule A/B: <b>13</b>	<b>\$100.00</b>	<input checked="" type="checkbox"/> <b>\$100.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>

Debtor 1 Joe Nathan Woodson Case number (if known) 24-43704

Debtor 2 Aisha Nicole Dennis

First Name Middle Name Last Name

## Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: <u>Cash</u> Line from Schedule A/B: <u>16</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Brief description: <u>Chime</u> <u>Checking account</u> <u>Acct. No.: 6458</u> Line from Schedule A/B: <u>17</u>	<u>\$1.09</u>	<input checked="" type="checkbox"/> <u>\$1.09</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Brief description: <u>Chime</u> <u>Checking account</u> <u>Acct. No.: 0603</u> Line from Schedule A/B: <u>17</u>	<u>\$81.37</u>	<input checked="" type="checkbox"/> <u>\$81.37</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Brief description: <u>First Convenience Bank</u> <u>Checking account</u> <u>Acct. No.: 7398</u> Line from Schedule A/B: <u>17</u>	<u>\$292.91</u>	<input checked="" type="checkbox"/> <u>\$292.91</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Brief description: <u>Cash App</u> <u>Other financial account</u> <u>Acct. No.: 5391</u> Line from Schedule A/B: <u>17</u>	<u>\$16.00</u>	<input checked="" type="checkbox"/> <u>\$16.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Brief description: <u>Cash App</u> <u>Other financial account</u> <u>Acct. No.: 3360</u> Line from Schedule A/B: <u>17</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Brief description: <u>Chime</u> <u>Savings account</u> <u>Acct. No.: 3922</u> Line from Schedule A/B: <u>17</u>	<u>\$5.50</u>	<input checked="" type="checkbox"/> <u>\$5.50</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Brief description: <u>2023 tax refund</u> <u>Federal tax</u> Line from Schedule A/B: <u>28</u>	<u>\$5,598.00</u>	<input checked="" type="checkbox"/> <u>\$5,598.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>



**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION**

IN RE: **Joe Nathan Woodson  
Aisha Nicole Dennis**

CASE NO **24-43704**  
CHAPTER **7**

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real Estate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicle	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4.	Watercraft, trailers, motors homes, and accessories	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$1,020.00	\$0.00	\$1,020.00	\$1,020.00	\$0.00
7.	Electronics	\$400.00	\$0.00	\$400.00	\$400.00	\$0.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$600.00	\$0.00	\$600.00	\$600.00	\$0.00
12.	Jewelry	\$1,000.00	\$0.00	\$1,000.00	\$1,000.00	\$0.00
13.	Nonfarm animals	\$100.00	\$0.00	\$100.00	\$100.00	\$0.00
14.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Deposits of money	\$396.87	\$0.00	\$396.87	\$396.87	\$0.00
18.	Bonds, mutual funds, or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Bonds and other financial instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interest in a qualified education fund, such as an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equitable or future interests in property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION**

IN RE: **Joe Nathan Woodson**  
**Aisha Nicole Dennis**

CASE NO **24-43704**  
CHAPTER **7**

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet #1*

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

<b>No.</b>	<b>Category</b>	<b>Gross Property Value</b>	<b>Total Encumbrances</b>	<b>Total Equity</b>	<b>Total Amount Exempt</b>	<b>Total Amount Non-Exempt</b>
26.	Copyrights, trademarks, websites and other intellectual property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, Franchises, and other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds	\$5,598.00	\$0.00	\$5,598.00	\$5,598.00	\$0.00
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts owed to the debtor	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Interest in property from deceased	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims against third parties	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	All other claims, includes contingent/unliquidated claims, counter claims, and creditor set offs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Other financial asset	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts receivable	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Machinery, fixtures and equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer lists	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Other businessrelated property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Other farm or fishing related property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION**

IN RE: **Joe Nathan Woodson  
Aisha Nicole Dennis**

CASE NO **24-43704**  
CHAPTER **7**

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet #2*

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

<b>No.</b>	<b>Category</b>	<b>Gross Property Value</b>	<b>Total Encumbrances</b>	<b>Total Equity</b>	<b>Total Amount Exempt</b>	<b>Total Amount Non-Exempt</b>
53.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTALS:</b>		<b>\$9,114.87</b>	<b>\$0.00</b>	<b>\$9,114.87</b>	<b>\$9,114.87</b>	<b>\$0.00</b>

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION

IN RE: Joe Nathan Woodson  
Aisha Nicole Dennis

CASE NO 24-43704  
CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet #3*

**Surrendered Property:**

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder

Property Description	Market Value	Lien	Equity
<b><u>Real Property</u></b>			
(None)			
<b><u>Personal Property</u></b>			
(None)			
<b>TOTALS:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Non-exempt Property by Item:**

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
<b><u>Real Property</u></b>				
(None)				
<b><u>Personal Property</u></b>				
(None)				
<b>TOTALS:</b>	<b>\$9,114.87</b>	<b>\$0.00</b>	<b>\$9,114.87</b>	<b>\$0.00</b>

Fill in this information to identify your case:

Debtor 1 **Joe Nathan Woodson**  
First Name Middle Name Last Name

Debtor 2 **Aisha Nicole Dennis**  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **Northern** District of **Texas**

Case number (if known) **24-43704**

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
---	--	---

2.1	ARIVO ACCEPTANCE LLC	Describe the property that secures the claim:	\$36,836.34	\$14,375.00	\$22,461.34
Creditor's Name <b>4770 S 5600 W,</b> <b>STE 200</b> Number Street <b>WEST VALLEY CITY, UT 84070</b> City State ZIP Code		<b>2017 Chevrolet Tahoe</b>			
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<input type="checkbox"/> Check if this claim relates to a community debt		Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset)			
Date debt was incurred <b>10/28/2023</b>		Last 4 digits of account number <b>3 3 3 1</b>			

Certificate of Title

Add the dollar value of your entries in Column A on this page. Write that number here: **\$36,836.34**

Debtor 1	<b>Joe</b>	<b>Nathan</b>	<b>Woodson</b>	Case number (if known) <b>24-43704</b>
Debtor 2	<b>Aisha</b>	<b>Nicole</b>	<b>Dennis</b>	
	First Name	Middle Name	Last Name	

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
<b>2.2</b>	<b>Automax Arlington</b> Creditor's Name <b>Attn: Bankruptcy</b> <b>200N Collins St</b> Number Street <b>Arlington, TX 76011</b> City State ZIP Code <b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <b>8/1/2024</b> <b>Describe the property that secures the claim:</b> <b>2014 Hyundai Santa Fe</b> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Nature of lien.</b> Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <b>Certificate of Title</b> Last 4 digits of account number <b>7 8 2 2</b>	<b>\$17,148.00</b>	<b>\$9,600.00</b>	<b>\$7,548.00</b>
<b>2.3</b>	<b>Conn Appliances, Inc.</b> Creditor's Name <b>c/o Becket and Lee LLP</b> <b>PO Box 3002</b> Number Street <b>Malvern, PA 77381</b> City State ZIP Code <b>Who owes the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <b>1/1/2021</b> <b>Describe the property that secures the claim:</b> <b>Sofa</b> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Nature of lien.</b> Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <b>Purchase Money</b> Last 4 digits of account number <b>0 5 7 1</b>	<b>\$3,053.00</b>	<b>\$100.00</b>	<b>\$2,953.00</b>
<b>Add the dollar value of your entries in Column A on this page. Write that number here:</b>		<b>\$20,201.00</b>		
<b>If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</b>				

Debtor 1 Joe Nathan Woodson Case number (if known) 24-43704  
 Debtor 2 Aisha Nicole Dennis  
 First Name Middle Name Last Name

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
<b>2.4</b>	<b>Conn Appliances, Inc.</b> Describe the property that secures the claim: <u>Television (2)</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>Purchase Money</u> Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>9/1/2021</u> Last 4 digits of account number <u>0 0 7 2</u>	<u>\$2,646.00</u>	<u>\$200.00</u>	<u>\$2,446.00</u>
<b>2.5</b>	<b>Flagship Credit Acceptance</b> Describe the property that secures the claim: <u>2022 Honda Accord</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>Certificate of Title</u> Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>1/1/2023</u> Last 4 digits of account number <u>1 0 0 1</u>	<u>\$36,223.00</u>	<u>\$18,566.00</u>	<u>\$17,657.00</u>
Add the dollar value of your entries in Column A on this page. Write that number here:		<u>\$38,869.00</u>		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		<u>\$95,906.34</u>		

Fill in this information to identify your case:

Debtor 1	<b>Joe</b>	<b>Nathan</b>	<b>Woodson</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Aisha</b>	<b>Nicole</b>	<b>Dennis</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Northern</b> District of <b>Texas</b>			
Case number (if known)	<b>24-43704</b>		

☐ Check if this is an amended filing

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.  
☐ Yes.

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		<b>Total claim</b>	
<b>4.1</b> <b>American Honda Finance Corporation</b> Nonpriority Creditor's Name <b>National Bankruptcy Center</b> <b>P.O. Box 168088</b> Number Street <b>Irving, TX 75016</b> City State ZIP Code	Last 4 digits of account number <b>9 3 6 2</b> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$4,296.60</b>	
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Repo Deficiency</b>	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			



Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<p><b>4.2</b> <u>ARIVO ACCEPTANCE LLC</u></p> <p>Nonpriority Creditor's Name</p> <p><u>4770 S 5600 W,</u></p> <p><u>STE 200</u></p> <p>Number Street</p> <p><u>WEST VALLEY CITY, UT 84070</u></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7 4 1 8</u></p> <p><b>When was the debt incurred?</b> <u>11/2/2023</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Auto Accident Deficiency</u></p>	<p><u>\$5,015.04</u></p>
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<p><b>4.3</b> <u>Chimefinal</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Po Box 417</u></p> <p>Number Street</p> <p><u>San Francisco, CA 94104</u></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7 2 2 8</u></p> <p><b>When was the debt incurred?</b> <u>5/1/2022</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>CreditLineSecured</u></p>	<p><u>\$67.00</u></p>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<p><b>4.4</b> <u>Cook Children's</u></p> <p>Nonpriority Creditor's Name</p> <p><u>P.O. Box 733720</u></p> <p>Number Street</p> <p><u>Dallas, TX 75373-3720</u></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3 8 7 7</u></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u></p>	<p><b>\$21,927.57</b></p>
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<p><b>4.5</b> <u>Crescent Bank &amp; Trust</u></p> <p>Nonpriority Creditor's Name</p> <p><u>P.O. Box 2829</u></p> <p>Number Street</p> <p><u>Addison, TX 70161-1813</u></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>4 1 3 1</u></p> <p><b>When was the debt incurred?</b> <u>2/1/2024</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Repo Deficiency</u></p>	<p><b>\$6,482.08</b></p>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.6</b>	<b>Envision Physician Services</b>	Last 4 digits of account number	<u>3</u> <u>8</u> <u>5</u> <u>9</u>	<b>\$75.00</b>
Nonpriority Creditor's Name		When was the debt incurred? _____		
<b>PO Box 99101 # 530</b>				
Number Street				
<b>Las Vegas, NV 89193</b>				
City State ZIP Code				
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>				

<b>4.7</b>	<b>FH Cann &amp; Associates</b>	Last 4 digits of account number	<u>3</u> <u>3</u> <u>1</u> <u>0</u>	<b>\$219.57</b>
Nonpriority Creditor's Name		When was the debt incurred? _____		
<b>100 Domain Drive Sutie 200</b>				
Number Street				
<b>Exeter, NH 03833</b>				
City State ZIP Code				
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -Navy Federal Credit Union</u>				

Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<p><b>4.8</b> <u>Fig Loans</u></p> <p>Nonpriority Creditor's Name <u>Attn: Bankruptcy</u></p> <p><u>335 Madison Ave</u></p> <p>Number <u>          </u> Street <u>          </u></p> <p><u>Manhattan, NY 10017</u></p> <p>City <u>          </u> State <u>          </u> ZIP Code <u>          </u></p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>6 0 6 9</u></p> <p><b>When was the debt incurred?</b> <u>2/1/2020</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Installment Loan</u></p>	<p><u>\$434.00</u></p>
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<p><b>4.9</b> <u>Heart and Vascular Specialists</u></p> <p>Nonpriority Creditor's Name <u>PO Box 668</u></p> <p>Number <u>          </u> Street <u>          </u></p> <p><u>Brentwood, TN 37024</u></p> <p>City <u>          </u> State <u>          </u> ZIP Code <u>          </u></p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3 0 5 5</u></p> <p><b>When was the debt incurred?</b> <u>          </u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u></p>	<p><u>\$657.89</u></p>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.10</b>	<b>Heart and Vascular Specialists</b>	Last 4 digits of account number <u>3 0 5 5</u>	<b>\$841.84</b>
Nonpriority Creditor's Name		When was the debt incurred? <u>11/22/2024</u>	
<b>PO Box 668</b>			
Number Street			
<b>Brentwood, TN 37024</b>			
City State ZIP Code			
Who incurred the debt? Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>			

<b>4.11</b>	<b>IC Systems, Inc</b>	Last 4 digits of account number <u>8 4 5 2</u>	<b>\$836.00</b>
Nonpriority Creditor's Name		When was the debt incurred? <u>3/1/2022</u>	
<b>Attn: Bankruptcy</b>			
<b>PO Box 64444</b>			
Number Street			
<b>Saint Paul, MN 55164</b>			
City State ZIP Code			
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -ATT U-VERSE</u>			

Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.12</b> <u>IC Systems, Inc</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>PO Box 64444</u> Number Street <u>Saint Paul, MN 55164</u> City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>9 5 7 5</u> When was the debt incurred? <u>1/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collection Agency</u>	<b>\$78.00</b>
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<b>4.13</b> <u>Landmark Strategy Group, LLC</u> Nonpriority Creditor's Name <u>C/O Weinstein &amp; Riley, P.S.</u> <u>749 GATEWAY, SUITE G-601</u> Number Street <u>ABILENE, TX 98121</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>0 2 2 1</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<b>\$3,581.60</b>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.14</b> <u>Medical Center Of Arlington</u> Nonpriority Creditor's Name <u>Resurgent Capital Services</u> <u>PO Box 1927</u> Number Street <u>Greenville, SC 37229</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>      </u> When was the debt incurred? <u>                    </u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>	<u>\$3,660.53</u>
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<b>4.15</b> <u>Navy Federal Credit Union</u> Nonpriority Creditor's Name <u>P.O. Box 23900</u> Number Street <u>MERRIFIELD, VA 22119</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1 1 9 1</u> When was the debt incurred? <u>6/22/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	<u>\$271.00</u>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.16	<b>Navy Federal Credit Union</b> Nonpriority Creditor's Name <b>P.O. Box 3000</b> Number Street  <b>Merrifield, VA 22119</b> City State ZIP Code	Last 4 digits of account number <u>1 1 9 1</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$251.55</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.17	<b>NTTA</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>PO Box 660244</b> Number Street <b>Dallas, TX 75266</b> City State ZIP Code	Last 4 digits of account number <u>9 5 1 0</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$77.68</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Tolls</u>	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			



Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.18</b> <u>NTTA</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>PO Box 660244</u> Number                      Street <u>Dallas, TX 75266</u> City                                  State                      ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3</u> <u>5</u> <u>2</u> <u>0</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Tolls</u>	<b>\$14.78</b>
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<b>4.19</b> <u>NTTA</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>PO Box 660244</u> Number                      Street <u>Dallas, TX 75266</u> City                                  State                      ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>8</u> <u>0</u> <u>6</u> <u>9</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Tolls</u>	<b>\$512.38</b>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.20</b>	<u>NTTA</u>	Last 4 digits of account number	<u>8</u> <u>0</u> <u>6</u> <u>9</u>	<u>\$922.08</u>
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Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred?

PO Box 660244

As of the date you file, the claim is: Check all that apply.

Number Street

☐ ContingentDallas, TX 75266☐ Unliquidated

City State ZIP Code

☐ Disputed

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

☐ Debtor 1 only☐ Student loans☐ Debtor 2 only☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☒ Debtor 1 and Debtor 2 only☐ Debts to pension or profit-sharing plans, and other similar debts☐ At least one of the debtors and another☒ Check if this claim is for a community debt☒ Other. Specify Tolls

Is the claim subject to offset?

☒ No☐ Yes

<b>4.21</b>	<u>NTTA</u>	Last 4 digits of account number	<u>8</u> <u>9</u> <u>8</u> <u>8</u>	<u>\$1,591.58</u>
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Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred?

11/21/245900 W. Plano Parkway

As of the date you file, the claim is: Check all that apply.

Number Street

☐ ContingentPlano, TX 75093☐ Unliquidated

City State ZIP Code

☐ Disputed

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

☐ Debtor 1 only☐ Student loans☐ Debtor 2 only☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☒ Debtor 1 and Debtor 2 only☐ Debts to pension or profit-sharing plans, and other similar debts☐ At least one of the debtors and another☒ Check if this claim is for a community debt☒ Other. Specify Tolls

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.22</b> <u>NTTA</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>5900 W. Plano Parkway</u> Number Street <u>Plano, TX 75093</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>9 6 0 4</u> When was the debt incurred? <u>11/07/24</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Tolls</u>	<b>\$29.36</b>
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<b>4.23</b> <u>Portfolio Recovery Associates, LLC</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>120 Corporate Blvd</u> Number Street <u>Norfolk, VA 23502</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>6 1 9 6</u> When was the debt incurred? <u>12/1/2018</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -COMENITY CAPITAL BANK</u>	<b>\$739.00</b>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<p><b>4.24</b> <u>Portfolio Recovery Associates, LLC</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Attn: Bankruptcy</u></p> <p><u>120 Corporate Blvd</u></p> <p>Number Street</p> <p><u>Norfolk, VA 23502</u></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>8 7 8 6</u></p> <p><b>When was the debt incurred?</b> <u>11/1/2018</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Collecting For -COMENITY BANK</u></p>	<p><u>\$685.00</u></p>
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<p><b>4.25</b> <u>Portfolio Recovery Associates, LLC</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Attn: Bankruptcy</u></p> <p><u>120 Corporate Blvd</u></p> <p>Number Street</p> <p><u>Norfolk, VA 23502</u></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>8 1 8 5</u></p> <p><b>When was the debt incurred?</b> <u>1/1/2021</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Collecting For -CAPITAL ONE BANK USA N.A.</u></p>	<p><u>\$674.00</u></p>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.26</b> <b>Portfolio Recovery Associates, LLC</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>120 Corporate Blvd</b> Number Street <b>Norfolk, VA 23502</b> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>6 8 1 8</u> When was the debt incurred? <u>11/1/2018</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -COMENITY BANK</u>	<b>\$650.00</b>
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<b>4.27</b> <b>Possible Finance</b> Nonpriority Creditor's Name <b>2231 First Avenue Suite B</b> Number Street <b>Seattle, WA 98121</b> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4 X K A</u> When was the debt incurred? <u>4/1/2024</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Installment Loan</u>	<b>\$421.00</b>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.28</b>	<b>Spring Oaks Capital SPV&amp;#044; LLC</b>	Last 4 digits of account number	<u>9</u> <u>1</u> <u>3</u> <u>8</u>	<b><u>\$2,336.68</u></b>
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Nonpriority Creditor's Name

**Attn: Bankruptcy**

When was the debt incurred?

4/30/2024

**1400 Crossways Blvd Suite 100B**

Number Street

As of the date you file, the claim is: Check all that apply.

**Chesapeake, VA 23320**

City State ZIP Code

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Collecting For -12 BMG LOANSATWORK LLC

Is the claim subject to offset?

- ☒ No  
☐ Yes

<b>4.29</b>	<b>Sunbit Financial</b>	Last 4 digits of account number	<u>9</u> <u>6</u> <u>6</u> <u>0</u>	<b><u>\$191.00</u></b>
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Nonpriority Creditor's Name

**Attn: Bankruptcy**

When was the debt incurred?

1/19/2022

**10880 Wilshire Blv Suite 870**

Number Street

As of the date you file, the claim is: Check all that apply.

**Los Angeles, CA 90024**

City State ZIP Code

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify InstallmentSalesContract

Is the claim subject to offset?

- ☒ No  
☐ Yes

Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.30</b> <u>Sunbit Financial</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>10880 Wilshire Blv Suite 870</u> Number Street <u>Los Angeles, CA 90024</u> City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3 8 1 4</u> When was the debt incurred? <u>8/17/2024</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>InstallmentSalesContract</u>	<b>\$169.00</b>
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<b>4.31</b> <u>T Mobile/T-Mobile USA Inc</u> Nonpriority Creditor's Name <u>by AIS Infosource, LP as agent</u> <u>PO Box 248848</u> Number Street <u>Oklahoma City, OK 75287</u> City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4 3 5 1</u> When was the debt incurred? <u>1/31/2024</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -T-MOBILE</u>	<b>\$555.65</b>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<p><b>4.32</b> <u>Target NB</u></p> <p>Nonpriority Creditor's Name</p> <p><u>P.O. box 673</u></p> <p>Number Street</p> <p><u>Minneapolis, MN 55440-0673</u></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>8 0 6 3</u></p> <p><b>When was the debt incurred?</b> <u>10/30/2017</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u></p>	<p><b>\$547.00</b></p>
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<p><b>4.33</b> <u>Transworld Systems</u></p> <p>Nonpriority Creditor's Name</p> <p><u>8131 LBJ Freeway Ste. 200</u></p> <p>Number Street</p> <p><u>Dallas, TX 75251</u></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>4 2 9 4</u></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Collecting For -IKids Pediatric Dentistry</u></p>	<p><b>\$1,362.90</b></p>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.34	<b>TX Tag</b> Nonpriority Creditor's Name <u>PO Box 650749</u> Number Street <u>Dallas, TX 75265</u> City State ZIP Code	Last 4 digits of account number <u>3 6 0 4</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$20.46</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Tolls</u>	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.35	<b>TX Tag</b> Nonpriority Creditor's Name <u>PO Box 650749</u> Number Street <u>Dallas, TX 75265</u> City State ZIP Code	Last 4 digits of account number <u>3 6 0 4</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$19.31</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Tolls</u>	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			



Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<p><b>4.38</b> <u>United Healthcare Insurance Company</u></p> <p>Nonpriority Creditor's Name</p> <p><u>PO Box 740800</u></p> <p>Number Street</p> <p><u>Atlanta, GA 30374</u></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3 7 0 1</u></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u></p>	<p><b>\$283.00</b></p>
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<p><b>4.39</b> <u>United Healthcare Insurance Company</u></p> <p>Nonpriority Creditor's Name</p> <p><u>PO Box 740800</u></p> <p>Number Street</p> <p><u>Atlanta, GA 30374</u></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>8 9 3 7</u></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u></p>	<p><b>\$50.06</b></p>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<p><b>4.40</b> <u>United Healthcare Insurance Company</u></p> <p>Nonpriority Creditor's Name</p> <p><u>PO Box 740800</u></p> <p>Number Street</p> <p><u>Atlanta, GA 30374</u></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3 7 0 1</u></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u></p>	<p><b>\$3,660.53</b></p>
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<p><b>4.41</b> <u>United Healthcare Insurance Company</u></p> <p>Nonpriority Creditor's Name</p> <p><u>PO Box 740800</u></p> <p>Number Street</p> <p><u>Atlanta, GA 30374</u></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3 7 0 1</u></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u></p>	<p><b>\$75.00</b></p>
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Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

4.42	<b>United Healthcare Insurance Company</b> Nonpriority Creditor's Name <b>PO Box 740800</b> Number Street  <b>Atlanta, GA 30374</b> City State ZIP Code	Last 4 digits of account number <u>3</u> <u>7</u> <u>0</u> <u>1</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>	<b>\$386.16</b>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.43	<b>Valor Intelligent Processing</b> Nonpriority Creditor's Name <b>PO Box 207899</b> Number Street  <b>Dallas, TX 75320</b> City State ZIP Code	Last 4 digits of account number <u>4</u> <u>4</u> <u>5</u> <u>7</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -NTTA</u>	<b>\$37.56</b>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>	Case number (if known) <u>24-43704</u>
Debtor 2	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<p><b>4.44</b> <u>Valor Intelligent Processing</u></p> <p>Nonpriority Creditor's Name <u>PO Box 207899</u></p> <p>Number <u>                    </u> Street <u>                    </u></p> <p><u>Dallas, TX 75320</u></p> <p>City <u>                    </u> State <u>                    </u> ZIP Code <u>                    </u></p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5</u> <u>0</u> <u>7</u> <u>1</u></p> <p><b>When was the debt incurred?</b> <u>                    </u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Collecting For -NTTA</u></p>	<p><b>\$163.58</b></p>
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<p><b>4.45</b> <u>Vance &amp; Huffman Llc</u></p> <p>Nonpriority Creditor's Name <u>Attn: Bankruptcy Attn: Bankruptcy</u></p> <p><u>55 Monette Pkwy , Ste 100</u></p> <p>Number <u>                    </u> Street <u>                    </u></p> <p><u>Smithfield, VA 23430</u></p> <p>City <u>                    </u> State <u>                    </u> ZIP Code <u>                    </u></p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0</u> <u>3</u> <u>4</u> <u>5</u></p> <p><b>When was the debt incurred?</b> <u>4/1/2024</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Collecting For -BUILD CARD REPUBLIC BANK</u></p>	<p><b>\$750.00</b></p>
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Debtor 1	<b>Joe</b>	<b>Nathan</b>	<b>Woodson</b>	Case number (if known) <b>24-43704</b>
Debtor 2	<b>Aisha</b>	<b>Nicole</b>	<b>Dennis</b>	
	First Name	Middle Name	Last Name	

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. <u>\$0.00</u>
	6b.	Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c.	Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e.	Total. Add lines 6a through 6d.	6e. <u>\$0.00</u>

			Total claim
Total claims from Part 2	6f.	Student loans	6f. <u>\$46,483.15</u>
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$65,643.93</u>
	6j.	Total. Add lines 6f through 6i.	6j. <u>\$112,127.08</u>

Fill in this information to identify your case:

Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u>24-43704</u>		

☐ Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<b>Aaron's LLC</b> Name <b>1435 W Arbrook Blvd</b> Number Street <b>Arlington, TX 76015</b> City State ZIP Code	<b>Furniture Lease</b> <b>Contract to be ASSUMED</b>
2.2	<b>Shady Valley Square Apts</b> Name <b>692 N Cypress St</b> Number Street <b>Orange, CA 92867</b> City State ZIP Code	<b>Residential Lease</b> <b>Contract to be ASSUMED</b>
2.3	<b>Spectrum</b> Name <b>PO Box 60074</b> Number Street <b>City of Industry, CA 91716</b> City State ZIP Code	<b>Cell phone service contract</b> <b>Contract to be ASSUMED</b>
2.4	 Name  Number Street  City State ZIP Code	



Fill in this information to identify your case:

Debtor 1	<b>Joe</b>	<b>Nathan</b>	<b>Woodson</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Aisha</b>	<b>Nicole</b>	<b>Dennis</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Northern</b> District of <b>Texas</b>			
Case number (if known)	<b>24-43704</b>		

☐ Check if this is an amended filing

## Official Form 106H

## Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No  
☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☐ No. Go to line 3.  
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☒ Yes. In which community state or territory did you live? **Texas**. Fill in the name and current address of that person.

**Aisha Nicole Dennis**

Name of your spouse, former spouse, or legal equivalent

**3603 Shady Valley Drive Apt 214**

Number Street

**Arlington, TX 76013**

City State ZIP Code

☒ Yes. In which community state or territory did you live? **Texas**. Fill in the name and current address of that person.

**Joe Nathan Woodson**

Name of your spouse, former spouse, or legal equivalent

**3603 Shady Valley Drive Apt 214**

Number Street

**Arlington, TX 76013**

City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name

☐ Schedule D, line \_\_\_\_\_

Number Street

☐ Schedule E/F, line \_\_\_\_\_

City State ZIP Code

☐ Schedule G, line \_\_\_\_\_



Fill in this information to identify your case:

Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u>24-43704</u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Employment

## 1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

## Employment status

## Occupation

## Employer's name

## Employer's address

How long employed there? 1 year 8 months

## Debtor 1

☒ Employed ☐ Not EmployedOperation SupervisorOcean Beauty SeafoodBox 70739  
Number StreetSeattle, WA 98127

City State Zip Code

## Debtor 2 or non-filing spouse

☒ Employed ☐ Not EmployedSpecialistWalgreens108 Wilmot Rd MS 2002  
Number StreetDeerfield, IL 60015

City State Zip Code

## Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1

For Debtor 2 or  
non-filing spouse2. \$6,128.31 \$2,544.593. + \$0.00 + \$0.004. \$6,128.31 \$2,544.59

Debtor 1  
Debtor 2Joe  
AishaNathan  
NicoleWoodson  
DennisCase number (if known) **24-43704**

First Name

Middle Name

Last Name

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here.....→	4.	\$6,128.31	\$2,544.59	
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$862.23	\$207.88	
5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
5c. Voluntary contributions for retirement plans	5c.	\$188.46	\$0.00	
5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
5e. Insurance	5e.	\$3.60	\$0.00	
5f. Domestic support obligations	5f.	\$0.00	\$0.00	
5g. Union dues	5g.	\$0.00	\$0.00	
5h. Other deductions. Specify: _____	5h. +	\$0.00	\$0.00	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$1,054.29	\$207.88	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$5,074.02	\$2,336.71	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00	
8b. Interest and dividends	8b.	\$0.00	\$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$392.24	
8d. Unemployment compensation	8d.	\$0.00	\$0.00	
8e. Social Security	8e.	\$0.00	\$0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00	\$0.00	
8g. Pension or retirement income	8g.	\$0.00	\$0.00	
8h. Other monthly income. Specify: _____	8h. +	\$0.00	\$0.00	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	\$392.24	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$5,074.02	\$2,728.95	= \$7,802.97
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +		\$0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies	12.		\$7,802.97	
Combined monthly income				
13. Do you expect an increase or decrease within the year after you file this form?				
<input checked="" type="checkbox"/> No.				
<input type="checkbox"/> Yes. Explain:				

Fill in this information to identify your case:

Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u>24-43704</u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☒ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

☐ No

☒ Yes. Fill out this information for each dependent.....

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

**Dependent's relationship to Debtor 1 or Debtor 2**

**Dependent's age**

**Does dependent live with you?**

Child

15

☐ No. ☒ Yes.

Child

11

☐ No. ☒ Yes.

Child

8

☐ No. ☒ Yes.

Child

20

☐ No. ☒ Yes.

☐ No. ☐ Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No

☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$1,399.00

If not included in line 4:

4a. Real estate taxes

4a. \$0.00

4b. Property, homeowner's, or renter's insurance

4b. \$0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$30.00

4d. Homeowner's association or condominium dues

4d. \$0.00

Debtor 1  
Debtor 2

**Joe  
Aisha**

**Nathan  
Nicole**

**Woodson  
Dennis**

First Name

Middle Name

Last Name

Case number (if known) **24-43704**

		Your expenses
5.	<b>Additional mortgage payments for your residence</b> , such as home equity loans	5. <u>\$0.00</u>
6.	<b>Utilities:</b>	
6a.	Electricity, heat, natural gas	6a. <u>\$450.00</u>
6b.	Water, sewer, garbage collection	6b. <u>\$200.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. <u>\$340.00</u>
6d.	Other. Specify: <u>Streaming Services</u>	6d. <u>\$50.00</u>
7.	<b>Food and housekeeping supplies</b>	7. <u>\$1,725.00</u>
8.	<b>Childcare and children's education costs</b>	8. <u>\$0.00</u>
9.	<b>Clothing, laundry, and dry cleaning</b>	9. <u>\$300.00</u>
10.	<b>Personal care products and services</b>	10. <u>\$300.00</u>
11.	<b>Medical and dental expenses</b>	11. <u>\$200.00</u>
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. <u>\$600.00</u>
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. <u>\$300.00</u>
14.	<b>Charitable contributions and religious donations</b>	14. <u>\$0.00</u>
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. <u>\$0.00</u>
15b.	Health insurance	15b. <u>\$160.00</u>
15c.	Vehicle insurance	15c. <u>\$780.00</u>
15d.	Other insurance. Specify: _____	15d. <u>\$0.00</u>
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. <u>\$0.00</u>
17.	<b>Installment or lease payments:</b>	
17a.	Car payments for Vehicle 1 <u>2022 Honda Accord</u>	17a. <u>\$836.00</u>
17b.	Car payments for Vehicle 2	17b. <u>\$0.00</u>
17c.	Other. Specify: _____	17c. <u>\$0.00</u>
17d.	Other. Specify: _____	17d. <u>\$0.00</u>
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. <u>\$0.00</u>
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. <u>\$0.00</u>
20.	<b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a.	Mortgages on other property	20a. <u>\$0.00</u>
20b.	Real estate taxes	20b. <u>\$0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c. <u>\$0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d. <u>\$0.00</u>
20e.	Homeowner's association or condominium dues	20e. <u>\$0.00</u>

Debtor 1  
Debtor 2

**Joe  
Aisha**

First Name

**Nathan  
Nicole**

Middle Name

**Woodson  
Dennis**

Last Name

Case number (if known) **24-43704**

21. Other. Specify: **Pet Expenses (Insurance and Food)**

21. + **\$200.00**

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. **\$7,870.00**

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. **\$0.00**

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. **\$7,870.00**

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from *Schedule I*.

23a. **\$7,802.97**

23b. Copy your monthly expenses from line 22c above.

23b. **-\$7,870.00**

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. **(\$67.03)**

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Fill in this information to identify your case:

Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u>24-43704</u>		

☐ Check if this is an amended filing

## Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

### Part 1: Summarize Your Assets

#### 1. **Schedule A/B: Property** (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	<u>\$0.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	<u>\$51,955.87</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	<u>\$51,955.87</u>

#### Your assets

Value of what you own

### Part 2: Summarize Your Liabilities

#### 2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	<u>\$95,906.34</u>
---	--------------------

#### 3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	<u>\$0.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	<u>+ \$112,127.08</u>

Your total liabilities

\$208,033.42

#### Your liabilities

Amount you owe

### Part 3: Summarize Your Income and Expenses

#### 4. **Schedule I: Your Income** (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	<u>\$7,802.97</u>
---	-------------------

#### 5. **Schedule J: Your Expenses** (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	<u>\$7,870.00</u>
---	-------------------



Debtor 1  
Debtor 2

**Joe  
Aisha**

First Name

**Nathan  
Nicole**

Middle Name

**Woodson  
Dennis**

Last Name

Case number (if known) **24-43704**

**Part 4:** Answer These Questions for Administrative and Statistical Records

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

**\$6,098.54**

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

**Total claim**

**From Part 4 on Schedule E/F, copy the following:**

9a. Domestic support obligations (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$46,483.15</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<b>+</b> <u>\$0.00</u>
9g. <b>Total.</b> Add lines 9a through 9f.	<u><b>\$46,483.15</b></u>

Fill in this information to identify your case:

Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u>24-43704</u>		

☐ Check if this is an amended filing

## Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

- ☒ No
- ☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X** /s/ Joe Nathan Woodson  
Joe Nathan Woodson , Debtor 1

**X** /s/ Aisha Nicole Dennis  
Aisha Nicole Dennis, Debtor 2

Date 12/31/2024  
MM/ DD/ YYYY

Date 12/31/2024  
MM/ DD/ YYYY

IN THE UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION

IN RE: **Joe Nathan Woodson**  
**Aisha Nicole Dennis**

CASE NO 24-43704

CHAPTER 7

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 12/31/2024 Signature /s/ Joe Nathan Woodson  
Joe Nathan Woodson , Debtor

Date 12/31/2024 Signature /s/ Aisha Nicole Dennis  
Aisha Nicole Dennis, Joint Debtor

Aaron's LLC  
1435 W Arbrook Blvd  
Arlington, TX 76015

Aisha Nicole Dennis  
3603 Shady Valley Drive Apt 214  
Arlington, TX 76013

Allmand Law Firm, PLLC  
860 Airport Fwy Ste 401  
Hurst, TX 76054-3264

American Honda Finance  
Corporation  
National Bankruptcy Center  
P.O. Box 168088  
Irving, TX 75016

ARIVO ACCEPTANCE LLC  
4770 S 5600 W, STE 200  
WEST VALLEY CITY, UT 84070

Attorney General of Texas  
Bankruptcy Collection Division  
PO Box 12017  
Austin, TX 78711

Automax Arlington  
Attn: Bankruptcy 200N Collins St  
Arlington, TX 76011

Chimefinal  
Po Box 417  
San Francisco, CA 94104

Conn Appliances, Inc.  
c/o Becket and Lee LLP  
PO Box 3002  
Malvern, PA 77381

Cook Children's  
P.O. Box 733720  
Dallas, TX 75373-3720

Crescent Bank & Trust  
P.O. Box 2829  
Addison, TX 70161-1813

Envision Physician Services  
PO Box 99101 # 530  
Las Vegas, NV 89193

FH Cann & Associates  
100 Domain Drive Suite 200  
Exeter, NH 03833

Fig Loans  
Attn: Bankruptcy 335 Madison Ave  
Manhattan, NY 10017

Flagship Credit Acceptance  
Attn: Bankruptcy  
PO Box 965  
Chadds Ford, PA 19317

Heart and Vascular Specialists  
PO Box 668  
Brentwood, TN 37024

IC Systems, Inc  
Attn: Bankruptcy  
PO Box 64444  
Saint Paul, MN 55164

Internal Revenue Service  
Centralized Insolvency Operations  
PO Box 7346  
Philadelphia, PA 19101-7346

Joe Nathan Woodson  
3603 Shady Valley Drive Apt 214  
Arlington, TX 76013

Landmark Strategy Group,  
LLC  
C/O Weinstein & Riley, P.S.  
749 GATEWAY, SUITE G-601  
ABILENE, TX 79601

Linebarger Goggan Blair &  
Sampson, LLP  
2777 N. Stemmons Freeway, Ste 1000  
Dallas, TX 75207

Medical Center Of Arlington  
Resurgent Capital Services  
PO Box 1927  
Greenville, SC 29615

Navy Federal Credit Union  
P.O. Box 23900  
MERRIFIELD, VA 22119

Navy Federal Credit Union  
P.O. Box 3000  
Merrifield, VA 22119

NTTA

Attn: Bankruptcy  
PO Box 660244  
Dallas, TX 75266

NTTA

Attn: Bankruptcy  
5900 W. Plano Parkway  
Plano, TX 75093

NTTA

PO Box 660244  
Dallas, TX 75266

Portfolio Recovery Associates,  
LLC

Attn: Bankruptcy  
120 Corporate Blvd  
Norfolk, VA 23502

Possible Finance

2231 First Avenue Suite B  
Seattle, WA 98121

Shady Valley Square Apts

692 N Cypress St  
Orange, CA 92867

Spectrum

PO Box 60074  
City of Industry, CA 91716

Spring Oaks Capital

SPV&#044; LLC

Attn: Bankruptcy  
1400 Crossways Blvd Suite 100B  
Chesapeake, VA 23320

Sunbit Financial  
Attn: Bankruptcy 10880 Wilshire Blv Suite  
870  
Los Angeles, CA 90024

T Mobile/T-Mobile USA Inc  
by AIS Infosource, LP as agent  
PO Box 248848  
Oklahoma City, OK 75287

Target NB  
P.O. box 673  
Minneapolis, MN 55440-0673

Texas Alcoholic Beverage  
Comm  
Licenses and Permits Division  
PO Box 13127  
Austin, TX 78711-3127

Transworld Systems  
8131 LBJ Freeway Ste. 200  
Dallas, TX 75251

TX Tag  
PO Box 650749  
Dallas, TX 75265

U.S. Department of Education  
c/o Nelnet  
121 S 13th St  
Lincoln, NE 68501

United Healthcare Insurance  
Company  
PO Box 740800  
Atlanta, GA 30374



United States Attorney  
–NORTH  
3rd. Floor, 1100 Commerce St  
Dallas, TX 75242

United States Trustee  
1100 Commerce Street Room 1254  
Dallas, TX 75242

US Attorney General  
US Department of Justice  
950 Pennsylvania Ave, NW  
Washington, DC 20530

Valor Intelligent Processing  
PO Box 207899  
Dallas, TX 75320

Vance & Huffman Llc  
Attn: Bankruptcy Attn: Bankruptcy  
55 Monette Pkwy , Ste 100  
Smithfield, VA 23430

Wehner MGMT  
DBA Shady Valley Square Apts  
3206 Green Tee Dr  
Arlington, TX 76013